NORTH CAROLINA COMMISSION FOR MENTAL HEALTH, DEVELOPMENTAL DISABILITIES AND SUBSTANCE ABUSE SERVICES

Advisory Committee Minutes Clarion Hotel 320 Hillsborough Street Raleigh, NC

Wednesday, April 21, 2010

Attending:

Commission Members:

Larry Pittman, John R. Corne, Dr. Diana Antonacci, Debra Dihoff, Dr. Ranota T. Hall, A. Joseph Kaiser, Beverly M. Morrow, Elizabeth MacMichael, Nancy Moore, Elizabeth Ramos, Don Trobaugh, Norman Carter, Sandra DuPuy, Dr. Richard Brunstetter

Excused:

Dr. John S. Carbone, Dr. Thomas E. Gettelman, Dr. John J. Haggerty, Jr., Phillip A. Mooring, John Owen

Division Staff:

Steven E. Hairston, W. Denise Baker, Marta T. Hester, Andrea Borden, Amanda Reeder

Others:

Cham Trowell, Elizabeth Edwards, Kent Earnhardt, Martha Brock, Louise G. Fisher, Betty Taylor, Robin Huffman, Mike Chandler

Handouts:

- 1) Handout Memorandum on Implementation Update #71
- 2) Handout Access to Healthcare: Health Disparities in Mental Health, Developmental Disabilities and Substance Abuse Populations
- 3) Handout Recommendations for MH/DD/SAS Workforce Development in North Carolina
- 4) Handout 2010 Priority Areas on Access to Healthcare
- 5) Handout Power Point Presentation on Critical Access Behavioral Health Agency CABHA
- 6) Handout Power Point Presentation on Network Analysis & CABHA Impact

Call to Order

The meeting was called to order by Larry Pittman, Chairman, Advisory Committee, at approximately 1:08 pm. Mr. Pittman welcomed the members of the Advisory Committee, requested a moment of reflection, and issued the ethics awareness and conflict of interest reminder.

Upon motion, second, and unanimous vote, the Advisory Committee approved the minutes of the January 20, 2010 Advisory Committee Meeting.

<u>Discussion – The Impact of CABHA at the LME Level</u>

Betty P. Taylor, CEO/Area Director at CenterPoint Human Services, delivered a power point presentation entitled, *Network Analysis & CABHA Impact*, to the Advisory Committee. Ms. Taylor advised that CenterPoint is concerned about the consequences of the Critical Access Behavioral Health Agency (CABHA) because it is another transition that the Local Management Entity (LME) cannot do as comprehensively as it should due to the lack of staffing manpower and funding resources. She further added that there are overlapping initiatives to eliminate community support services and transition to CABHAs resulting in having to jockey staff and requesting the Centers for Medicaid and Medicare (CMS) to extend the deadline. Ms. Taylor emphasized that CMS has not granted the extension yet; thus, creating another dilemma. She concluded her presentation by reviewing the CABHA transition deadlines.

Ms. Taylor received the following comments and questions from the Advisory Committee:

- Norman Carter expressed concern that Ms. Taylor had not discussed anything related to Traumatic Brain Injury (TBI) and that it was not on the Advisory Committee meeting agenda.
- Larry Pittman asked how CABHA would affect consumers in the CenterPoint area. Ms Taylor responded that providers may not be able to build capacity to deliver services; therefore, resulting in a delay in services.

Cham Trowell, Director of Clinical Operations – Access, Care Coordination, and Customer Services at East Carolina Behavioral Health (ECBH), delivered a power point presentation entitled, *The Critical Access Behavioral Health Agency – CABHA*. Ms. Trowell's presentation focused on what a CABHA is as well as arguments for and against CABHAs.

Ms. Trowell received the following questions and comments from the Advisory Committee:

- Mr.Carter asked if there was a place within CABHAs for individuals who are high school graduates and have no college education and Ms. Trowell responded yes.
- Elizabeth Ramos asked about providing a rating scale for providers and Sandra DuPuy stated Mecklenburg had already developed this system for providers. Ms. Trowell advised that ECBH has a similar process.
- Mr. Pittman asked about the 1915 (b)(c) Waiver and was advised that ECBH has applied.

Finalize 2010 Priority Areas for Advisory Committee on Access to Healthcare: Health Disparities in Mental Health, Developmental Disabilities and Substance Abuse Populations
The Advisory Committee established the following listing of agenda items and questions for their next meeting.

- Invite Sandy Ellsworth to return to the Advisory Committee and address the members regarding where the committee can get involved and to provide an update on Traumatic Brain Injury (TBI).
- Request an update on the Staff Definitions Workgroup and request that a representative present at the next Advisory Committee meeting.
- Invite Sandra Farmer, President of the Brain Injury Association of North Carolina, to discuss TBI, as requested by Norman Carter.
- Request a link to the Workforce Development report on the Division's web site be sent to the Advisory Committee members.

- Provide updates/status reports on each recommendation developed within the Workforce Development Initative Report. The Committee requested that information be sent to members before next Advisory Committee meeting in July 2010.
- Requested information on Community Support Services: How are services formerly under by Community Support currently being handled? Invite a Division representative to discuss at next meeting to address what will happen as a result of this change? Also, how does new plan with CABHA and the Waiver provide a safety net for community support?

The Committee concluded its discussion by finalizing the priority ranking of the access to healthcare topics which are listed below:

- 1. Community Support Services
- 2. Workforce Development
- 3. Veterans and Mental Health/Developmental Disabilities/ and Substance Abuse Services to include Traumatic Brain Injury (TBI)

Public Comment

Martha Brock, who identified herself as a consumer from Wake County and a member of the Board of Directors of NC Mental Hope, advised the Advisory Committee that they have not heard from consumer groups and advocacy organizations. She further added that these groups are opposed to CABHA as well as Club Houses. Louise Fisher, who identified herself as a volunteer advocate for the mentally ill, commented that the state legislature eliminated community support and the NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services allowed the program to operate without guidance and guidelines which resulted in too much money being utilized in the first month. Dr. Kent Earnhardt told the Committee that he is actively involved with Disability Rights North Carolina and that it is important to hear from both sides, to include consumers, about CABHA. Mike Chandler asked several implementation questions related to CABHAs.

There being no further business, the meeting adjourned at 3:57 pm.